United States Bankruptcy Court District of Puerto Rico, San Juan Division

| IN RE: | | Case No |
|-------------------------------------|--|---|
| RAMOS OYOLA, PEDRO JUAN & OYO | , | Chapter 7 |
| | Debtor(s) | |
| | VERIFICATION OF CREDITOR MAT | RIX |
| The above named debtor(s) hereby ve | erify(ies) that the attached matrix listing creditor | ors is true to the best of my(our) knowledge. |
| | | |
| | | |
| Date: November 9, 2021 | Signature: /s/ PEDRO JUAN RAMOS OYOLA | 4 |
| | PEDRO JUAN RAMOS OYOLA | Debtor |
| | | |
| Date: November 9, 2021 | Signature: /s/ MARIA OYOLA ENCARNACIO | N |
| | MARIA OYOLA ENCARNACION | Joint Debtor, if any |

Attorney General of the United States Merrick B Garland Esq 950 Pennsylvania Ave NW Washington, DC 20530-0001

Citi PO Box 6190 Sioux Falls, SD 57117-6190

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Firstbank PO Box 9146 San Juan, PR 00908-0146

Firstbank Puerto Rico PO Box 19327 San Juan, PR 00910-1427

Firstbank Puerto Rico PO Box 9146 San Juan, PR 00908-0146

Island Finance PO Box 195369 San Juan, PR 00919-5369 Toyota Motor Credit Co PO Box 9786 Cedar Rapids, IA 52409-0004

United States Attorney District of PR W. Stephen Muldrow Esq Room 150 Federal Bldg San Juan, PR 00917

US Small Business Adm. 14925 Kingsport Road Fort Worth, TX 76155-2243

US Small Business Administration PR Disaster Assistance 273 Ponce de Leon Ste 510 Hato Rey, PR 00917

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United States Bankruptcy Court District of Puerto Rico, San Juan Division

| IN RE: | Case No | |
|--|--|--|
| RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, MAR | Chapter 7 | |
| | E TO CONSUMER DEBTOR(S) E BANKRUPTCY CODE | |
| Certificate of [Non-Attorney] | Bankruptcy Petition Preparer | |
| I, the [non-attorney] bankruptcy petition preparer signing the debtornotice, as required by § 342(b) of the Bankruptcy Code. | r's petition, hereby certify that I delivered to the | ne debtor the attached |
| Printed Name and title, if any, of Bankruptcy Petition Preparer Address: | Social Security numb petition preparer is no the Social Security nu principal, responsible the bankruptcy petitio (Required by 11 U.S. | ot an individual, state amber of the officer, person, or partner of on preparer.) |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible responsible social Security number is provided above. | oonsible person, or | |
| Certificate of | of the Debtor | |
| I (We), the debtor(s), affirm that I (we) have received and read the | attached notice, as required by § 342(b) of the | Bankruptcy Code. |
| RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, MA | X /s/ PEDRO JUAN RAMOS OYOLA | 11/09/2021 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | X /s/ MARIA OYOLA ENCARNACION | 11/09/2021 |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Signature of Joint Debtor (if any)

Date

| Eill in Al- | .: | | | |
|---------------------|---|------------------------|--|---|
| FIII In th | nis information to identif | y your case: | | |
| Debtor 1 | PEDRO JUAN RA | MOS OYOLA Middle Name | Last Name | |
| Debtor 2 | | | Last Name | |
| (Spouse if, filing) | MARIA OYOLA E First Name | Middle Name | Last Name | |
| United States Ba | inkruptcy Court for the: | DISTRICT OF PU | ERTO RICO, SAN JUAN DIVISION | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | | | | , |
| | | | | |
| Official Fo | rm 108 | | | |
| Stateme | nt of Intentio | n for Indiv | viduals Filing Under Chapt | ter 7 12/15 |
| | | | | |
| If you are an indi | ividual filing under chap | ter 7, you must fill | out this form if: | |
| creditors have | e claims secured by you | ır property, or | | |
| | sed personal property a | | | |
| | ever is earlier, unless the | | you file your bankruptcy petition or by the date set time for cause. You must also send copies to the | |
| | eople are filing together te the form. | in a joint case, bot | h are equally responsible for supplying correct inf | ormation. Both debtors must sign |
| | and accurate as possible our name and case num | | needed, attach a separate sheet to this form. On th | ne top of any additional pages, |
| Dort 1: List V | our Craditors Who Have | Secured Claims | | |
| Part 1: List Yo | our Creditors Who Have | Secured Claims | | |
| information be | elow. | | Creditors Who Have Claims Secured by Property | |
| Identify the cr | editor and the property the | nat is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
| | | | 22200 d dosci | ac oxompt on concade of |
| | | | | |
| = | irstbank Puerto Rico |) | ☐ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | |
| Description of | VILLA VICTORIA | (16 6 | ☐ Retain the property and enter into a <i>Reaffirmation Agreement</i> . | n ■ Yes |

Creditor's **Toyota Motor Credit Co** name:

00725-3457

☐ Surrender the property.

■ No

Description of 2020 Toyota C-HR ☐ Retain the property and redeem it. ☐ Retain the property and enter into a *Reaffirmation*

Retain the property and [explain]:

☐ Yes

property

STREET, CAGUAS, PR

Agreement.

securing debt:

property

securing debt:

Retain the property and [explain]:

Retain and pay pursuant to contract

Retain and pay pursuant to contract

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

| Debto Debto | | RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNA MARIA | CION, | Case number (if known) |
|----------------|---------|---|---------|--|
| | r's nar | ne: of leased | | □ No |
| Prope | | | | ☐ Yes |
| | r's nan | | | □ No |
| Prope | | of leased | | ☐ Yes |
| | r's nan | ne: of leased | | □ No |
| Prope | • | or reased | | ☐ Yes |
| | r's nan | ne: of leased | | □ No |
| Prope | | or reased | | ☐ Yes |
| | r's nan | ne: of leased | | □ No |
| Prope | | or reased | | ☐ Yes |
| | r's nan | ne: of leased | | □ No |
| Prope | | or reased | | ☐ Yes |
| | r's nan | ne: of leased | | □ No |
| Prope | | or reased | | ☐ Yes |
| Part 3 | Si | ign Below | | |
| | | ty of perjury, I declare that I have indicated my intention about is subject to an unexpired lease. | out any | y property of my estate that secures a debt and any personal |
| | | | | s/ MARIA OYOLA ENCARNACION |
| | | O JUAN RAMOS OYOLA ure of Debtor 1 | | IARIA OYOLA ENCARNACION ignature of Debtor 2 |
| | Date | November 9, 2021 | Date | November 9, 2021 |

| Fill in this information to identify your case: | | |
|---|---------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| DISTRICT OF PUERTO RICO, SAN JUAN DIVISION | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: | Identify Yourself | | |
|-----|-----------------------|---|------------------------------------|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your pictu exan | e the name that is on government-issued ure identification (for nple, your driver's use or passport). | PEDRO First name JUAN Middle name | MARIA First name Middle name |
| | Bring iden | g your picture tification to your meeting the trustee. | PAMOS OVOLA | OYOLA ENCARNACION Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | Inclu | ide your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number | xxx-xx-0909 | xxx-xx-9189 |

Debtor 1 Debtor 2 RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, MARIA

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) | ■ I have not used any business name or EINs. Business name(s) |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | VILLA VICTORIA K16 6 STREET CAGUAS, PR 00725-3457 Number, Street, City, State & ZIP Code Caguas County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |

Debtor 2 MARIA Part 2: Tell the Court About Your Bankruptcy Case The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When District Case number District When Case number When District Case number 10. Are any bankruptcy cases ■ No pending or being filed by ☐ Yes. a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Case number (if known)

Debtor 1

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

| 3: Report About Any Bus | sinesses \ | ou Own as a Sole Prop | rietor |
|---|---|---|--|
| Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | |
| | ☐ Yes. | Name and location o | f business |
| A sole proprietorship is a | | | |
| business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | |
| If you have more than one sole proprietorship, use a separate sheet and attach it | | Number, Street, City | , State & ZIP Code |
| to this petition. | | Check the appropriat | e box to describe your business: |
| | | ☐ Health Care B | Business (as defined in 11 U.S.C. § 101(27A)) |
| | | ☐ Single Asset | Real Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | ☐ Stockbroker (| as defined in 11 U.S.C. § 101(53A)) |
| | | ☐ Commodity B | roker (as defined in 11 U.S.C. § 101(6)) |
| | | ■ None of the a | bove |
| Chapter 11 of the | under Su | bchapter V so that it can to proceed under Subcha | the court must know whether you are a small business debtor or a debtor choosing to proceed set appropriate deadlines. If you indicate that you are a small business debtor or you are apter V, you must attach your most recent balance sheet, statement of operations, cash-flow return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). |
| For a definition of small | ■ No. | I am not filing under | Chapter 11. |
| business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Cha Code. | pter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | ☐ Yes. | | pter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I α d under Subchapter V of Chapter 11. |
| | ☐ Yes. | | oter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I uder Subchapter V of Chapter 11. |
| _ | | | |
| <u> </u> | Have Any | Hazardous Property or | Any Property That Needs Immediate Attention |
| | No. | | |
| alleged to pose a threat of imminent and identifiable | ☐ Yes. | What is the hazard? | |
| safety? Or do you own any property that needs immediate attention? | | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | Number, Street, City, State & Zip Code |
| | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D). 4: Report if You Own or Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 108 U.S.C. § 101(51D). No. Yes. | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filling under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 101(51D). Are question of small business debtor, see 11 U.S.C. § 101(51D). I am filling under Chapter 11, under Subchapter V so that it can choosing to proceed under Subchapter V so that it can choos |

Debtor 1 Debtor 2

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 2 Case number (if known) MARIA Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that after any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ PEDRO JUAN RAMOS OYOLA /s/ MARIA OYOLA ENCARNACION PEDRO JUAN RAMOS OYOLA MARIA OYOLA ENCARNACION Signature of Debtor 1 Signature of Debtor 2 Executed on November 9, 2021 Executed on November 9, 2021 MM / DD / YYYY MM / DD / YYYY

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

Debtor 1

| ebtor 1 | RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, | | |
|---------|--|------------------------|--|
| ebtor 2 | MARIA | Case number (if known) | |
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Roberto Figueroa-Carrasquillo | Date | November 9, 2021 |
|--|---------------|----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Roberto Figueroa-Carrasquillo | | |
| Printed name | | |
| RFigueroa Carrasquillo Law Office PSC | | |
| Firm name | | |
| PO Box 186 | | |
| Caguas, PR 00726-0186 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (787) 744-7699 | Email address | rfc@rfigueroalaw.com |
| USDC 203614 | | |
| Bar number & State | | |

| Fill in th | is information to ic | lentify your case | and this filing: | | |
|---|--------------------------|----------------------|---|--|---|
| Debtor 1 | | N RAMOS OYO | - | | |
| | First Name | Middle | Name Last Name | } | |
| Debtor 2 (Spouse, if filing) | MARIA OYOI First Name | _A ENCARNA(| | | |
| | ankruptcy Court for t | he: DISTRICT | OF PUERTO RICO, SAN JUAN DIVISION | | |
| Case number _ | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| _ | rm 106A/B | | | | |
| Schedul | e A/B: Pr | operty | | | 12/15 |
| Answer every ques | stion. | • | eet to this form. On the top of any additional pages, ner Real Estate You Own or Have an Interest In | write your name and case | number (if known). |
| 1. Do you own or h | nave any legal or equ | itable interest in a | ny residence, building, land, or similar property? | | |
| ☐ No. Go to Par | rt 2. | | | | |
| Yes. Where is | s the property? | | | | |
| VILLA VICTORIA K16 6 STREET Street address, if available, or other description | | | What is the property? Check all that apply Single-family home □ Duplex or multi-unit building Condominium or cooperative | Do not deduct secured clause the amount of any secure Creditors Who Have Claim | d claims on Schedule D: |
| CAGUAS | PR | 00725-3457 | ☐ Manufactured or mobile home | Current value of the | Current value of the |
| City | State | ZIP Code | ☐ Land ☐ Investment property | entire property? \$79,200.00 | portion you own? \$79.200.00 |
| | | | ☐ Timeshare ☐ Other | Describe the nature of y | our ownership interest ancy by the entireties, or |
| | | | Who has an interest in the property? Check one | à life estate), if known. | |
| | | | ☐ Debtor 1 only ☐ Debtor 2 only | Fee Simple | |
| County | | | Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is con (see instructions) | nmunity property |
| | | | Other information you wish to add about this item property identification number: | , such as local | |
| | | | Debtors owns a residential located at Puerto Rico; this property consists of bathroom, living & dining room, kitche | two (2) bedrooms, | one (1) |
| | | | | | |
| | | | all of your entries from Part 1, including any e | | \$79,200.00 |

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debtor 1 Debtor 2 | MARIA | .A, PEDRO JUAN & OYOLA ENCARNACION, | Case number (if known) | |
|----------------------|--|---|--|---|
| 3. Cars, var | ns, trucks, tractor | s, sport utility vehicles, motorcycles | | |
| □ No | | | | |
| ■ Yes | | | | |
| | Toyeta | | Do not deduct secu | ured claims or exemptions. Put |
| 3.1 Make Mode | 0.110 | Who has an interest in the property? Check one ☐ Debtor 1 only | the amount of any | secured claims on Schedule D: ve Claims Secured by Property. |
| Year: | | Debtor 2 only | | |
| | oximate mileage: | Debtor 1 and Debtor 2 only | Current value of t entire property? | he Current value of the portion you own? |
| | r information: | ☐ At least one of the debtors and another | | |
| VIN | no JTNKHMBX | OL1087203 Check if this is community property (see instructions) | \$21,251 | .00 \$21,251.00 |
| .you hav | e attached for Par scribe Your Persona | e portion you own for all of your entries from Part 2, including t 2. Write that number here I and Household Items al or equitable interest in any of the following items? | | \$21,251.00 Current value of the portion you own? |
| Example □ No □ | Describe | hishings s, furniture, linens, china, kitchenware | | claims or exemptions. |
| | | | | <u> </u> |
| | | Two (2) ceiling fans | | \$50.00 |
| | | Two (2) A/C Inverter Unit | | \$500.00 |
| | | Household Goods and Furnishings (beds, sofas, tables, others) | | \$1,000.00 |
| | | One (1) refrigerator | | \$200.00 |
| | | One (1) stove | | \$200.00 |
| | | One (1) washing machine | | \$150.00 |
| | [(| One (1) dry | | \$100.00 |
| □ No | es: Televisions and i including cell ph | radios; audio, video, stereo, and digital equipment; computers, printenones, cameras, media players, games | ers, scanners; music collect | tions; electronic devices |
| ■ Yes. | Describe | One (1) microwave oven | | \$50.00 |
| | [7 | Гwo (2) TV Set (22"/\$40.00; 32"/\$100.00) | | \$140.00 |

| 8. | Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles |
|-----|--|
| | ■ No □ Yes. Describe |
| 9. | Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No |
| | ☐ Yes. Describe |
| 10. | Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No |
| | ☐ Yes. Describe |
| 11. | Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No |
| | ■ Yes. Describe Clothing and personal effects \$400.00 |
| 12. | Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ■ Yes. Describe |
| | Jewelry \$100.00 |
| 13. | Non-farm animals Examples: Dogs, cats, birds, horses ■ No □ Yes. Describe |
| 14. | Any other personal and household items you did not already list, including any health aids you did not list No |
| | ☐ Yes. Give specific information |
| 15 | Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here |
| | rt 4: Describe Your Financial Assets |
| Do | o you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes |
| 17 | |
| 17. | Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No |
| | ■ Yes |

Case number (if known)

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

Debtor 1 Debtor 2

MARIA

| Debtor 1 Debtor 2 | RAMOS OYOLA, PE MARIA | EDRO JUAN & OYOL | A ENCARNACION, Case number (if known) | |
|-------------------------------|--|--|---|---------------------|
| | | | Banco Popular de Puerto Rico | |
| | | | Account no. x7177 | |
| | 17.1. | Checking Account | Checking account (direct deposit Social Security) | \$548.00 |
| | | | Firstbank | |
| | 47.0 | Observation Assessment | Account no. x4111 | ¢40.00 |
| | 17.2. | Checking Account | Checking account | \$10.00 |
| | | | Coop A/C Las Piedras | |
| | 17.3. | Savings Account | Account no. x3576 Savings and Shares | \$157.00 |
| | | - | | |
| | | | Coop A/C Las Piedras Account no x3574 | |
| | 17.4. | Savings Account | Savings and Shares | \$40.00 |
| 8. Bonds Exam | s, mutual funds, or public ples: Bond funds, investme | ly traded stocks nt accounts with brokerage | e firms, money market accounts | |
| | | Institution or issuer name | x: | |
| joint v ■ No | venture Give specific information | · | and unincorporated businesses, including an interest in an LLC % of ownership: | c, partnership, and |
| Negot Non-ri ■ No | tiable instruments include progotiable instruments are the Give specific information a | ersonal checks, cashiers' o hose you cannot transfer to | and non-negotiable instruments checks, promissory notes, and money orders. so someone by signing or delivering them. | |
| | ment or pension account: ples: Interests in IRA, ERIS | | , thrift savings accounts, or other pension or profit-sharing plans | |
| | List each account separate Type | | Institution name: | |
| Your s | | you have made so that you | u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others | 6 |
| | | | Institution name or individual: | |
| 3. Annuit ■ No | ties (A contract for a period | ic payment of money to you | u, either for life or for a number of years) | |
| | lssuer nam | ne and description. | | |
| 24. Interes 26 U.S. | ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a | an account in a qualified and 529(b)(1). | d ABLE program, or under a qualified state tuition program. | |
| | Institution r | name and description. Sepa | arately file the records of any interests.11 U.S.C. § 521(c): | |
| ■ No | • | | han anything listed in line 1), and rights or powers exercisable fo | or your benefit |
| ☐ Yes. | Give specific information | about them | | |
| | s, copyrights, trademarks | | er intellectual property n royalties and licensing agreements | |

Official Form 106A/B Schedule A/B: Property page 4

■ No

| | ebtor 1 ebtor 2 | RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNA MARIA | Case number (if known) | |
|-----|--------------------|--|--|--|
| | ☐ Yes. | Give specific information about them | | |
| 27 | Examp ■ No | es, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooperative association has Give specific information about them | ldings, liquor licenses, professional licenses | |
| M | | property owed to you? | | Current value of the |
| IVI | oney or | property owed to you? | | portion you own? Do not deduct secured claims or exemptions. |
| 28 | ■ No | unds owed to you | | |
| | ☐ Yes. | Give specific information about them, including whether you already | filed the returns and the tax years | |
| 29 | ■ No | support les: Past due or lump sum alimony, spousal support, child suppor Give specific information | t, maintenance, divorce settlement, property se | ettlement |
| | ⊔ Yes. | Give specific information | | |
| 30 | Examp | imounts someone owes you iles: Unpaid wages, disability insurance payments, disability benefits unpaid loans you made to someone else | s, sick pay, vacation pay, workers' compensatio | n, Social Security benefits; |
| | ■ No □ Yes. | Give specific information | | |
| 31 | Examp | ts in insurance policies bles: Health, disability, or life insurance; health savings account (HS | A); credit, homeowner's, or renter's insurance | |
| | ■ No □ Yes. | Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| 32 | | erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insura | ance policy, or are currently entitled to receive pr | operty because someone has |
| | ■ No □ Yes. | Give specific information | | |
| 33 | Examp | against third parties, whether or not you have filed a lawsuit of les: Accidents, employment disputes, insurance claims, or rights t | | |
| | ■ No □ Yes. | Describe each claim | | |
| 34 | Other o | contingent and unliquidated claims of every nature, including of | counterclaims of the debtor and rights to se | t off claims |
| | ☐ Yes. | Describe each claim | | |
| 35 | ■ No | ancial assets you did not already list | | |
| | ☐ Yes. | Give specific information | | |
| 36 | | he dollar value of all of your entries from Part 4, including any b. Write that number here | | \$755.00 |
| Pa | art 5: De | scribe Any Business-Related Property You Own or Have an Interest In | . List any real estate in Part 1. | |
| 37. | Do you o | own or have any legal or equitable interest in any business-related pro | perty? | |

☐ Yes. Go to line 38.

Official Form 106A/B Schedule A/B: Property page 5

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■ No. Go to Part 6.

| Debte Debte | | RAMOS OYOLA, PEDRO JUAN & OYOLA EN | ICARNACION, | Case number (if known) | |
|----------------|--------|--|----------------------------|---------------------------|-------------------------|
| | | | | | |
| Part 6 | | scribe Any Farm- and Commercial Fishing-Related Property ou own or have an interest in farmland, list it in Part 1. | You Own or Have an Interes | st In. | |
| 46. D | o you | own or have any legal or equitable interest in any fa | rm- or commercial fishing | -related property? | |
| I | No. | Go to Part 7. | | | |
| [| ☐ Yes. | Go to line 47. | | | |
| Part 7 | 7: | Describe All Property You Own or Have an Interest in Tha | t You Did Not List Above | | |
| | | have other property of any kind you did not already les: Season tickets, country club membership | list? | | |
| | No | | | | |
| | Yes. (| Give specific information | | | |
| 54. | Add ti | ne dollar value of all of your entries from Part 7. Write | e that number here | | \$0.00 |
| Part 8 | B: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$79,200.00 |
| 56. | Part 2 | : Total vehicles, line 5 | \$21,251.00 | | |
| 57. | Part 3 | : Total personal and household items, line 15 | \$3,090.00 | | |
| 58. | Part 4 | : Total financial assets, line 36 | \$755.00 | | |
| 59. | Part 5 | : Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6 | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | : Total other property not listed, line 54 | + \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$25,096.00 | Copy personal property to | tal \$25,096.0 0 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$104,296.00 |

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

| | Fill in this | s information to identify | our case: | | | | |
|---------------------------------|--|--|--|--|---|---------------------------------------|--|
| De | ebtor 1 | PEDRO JUAN RAM | | | | | |
| | | First Name | Middle Name | L | ast Name | | |
| | ebtor 2 oouse if, filing) | First Name | Middle Name | L | ast Name | | |
| Ur | nited States Bar | nkruptcy Court for the: | DISTRICT OF PUERTO RIC | O, SA | AN JUAN DIVISION | | |
| Ca | ase number | _ | | | | | |
| | known) | | | | | Check if this is an amended filing | |
| O. | fficial Fo | rm 106C | | | | | |
| S | chedule | e C: The Prop | oerty You Cla | im | as Exempt | 4/19 | |
| pro out kno For | perty you listed and attach to thown). | on Schedule A/B: Property is page as many copies of property you claim as exc | r(Official Form 106A/B) as yo Part 2: Additional Page as ne empt, you must specify the | ecessa amou | urce, list the property that you claim a ary. On the top of any additional page unt of the exemption you claim. O | | |
| app fun to a | olicable statuto ds—may be u | ory limit. Some exemption Inlimited in dollar amount Ilar amount and the value | ns—such as those for healt . However, if you claim an o | th aid: exem _l | s, rights to receive certain benefit | under a law that limits the exemption | |
| Pa | rt 1: Identif | y the Property You Claim | as Exempt | | | | |
| 1. | Which set of | exemptions are you clair | ming? Check one only, even | if you | r spouse is filing with you. | | |
| | ☐ You are cla | aiming state and federal nor | nbankruptcy exemptions. 11 | U.S.C | C. § 522(b)(3) | | |
| | ■ You are cla | aiming federal exemptions. | 11 U.S.C. § 522(b)(2) | | | | |
| 2. | For any prop | erty you list on Schedule | e A/B that you claim as exe | mpt, f | ill in the information below. | | |
| | | on of the property and line of | | Am | ount of the exemption you claim | Specific laws that allow exemption | |
| | Schedule A/B1 | that lists this property | portion you own Copy the value from Schedule A/B | Copy the value from Check only one box for each exemption. | | | |
| De | ebtor 1 Exem | nptions | Someware 7.72 | | | | |
| | | ORIA K16 6 STREET | \$79,200.00 | | \$50,300.00 | 11 USC § 522(d)(1) | |
| | CAGUAS P | R, 00725-3457 Pedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | VII I A VICT | ORIA K16 6 STREET | \$79,200.00 | | \$2,443.00 | 11 USC § 522(d)(5) | |
| | CAGUAS P | R, 00725-3457 edule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | One (1) Em Generator | ergency Gasoline Po | wer \$200.00 | • | \$200.00 | 11 USC § 522(d)(3) | |
| | | edule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Two (2) cei | ling fans edule A/B: 6.2 | \$50.00 | | \$50.00 | 11 USC § 522(d)(3) | |
| | Line nom och | oddio 77D. V.L | | | 100% of fair market value, up to any applicable statutory limit | | |
| | | C Inverter Unit | \$500.00 | • | \$500.00 | 11 USC § 522(d)(3) | |

100% of fair market value, up to any applicable statutory limit

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

Debtor 1
Debtor 2
RAMOS
MARIA Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption. | | Specific laws that allow exemption | |
|--|---|---|---|------------------------|
| Household Goods and Furnishings (beds, sofas, tables, others) | \$1,000.00 | • | \$1,000.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B 6.4 | | | 100% of fair market value, up to any applicable statutory limit | |
| One (1) refrigerator Line from Schedule A/B 6.5 | \$200.00 | | \$200.00 | 11 USC § 522(d)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| One (1) stove Line from Schedule A/B 6.6 | \$200.00 | | \$200.00 | 11 USC § 522(d)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| One (1) washing machine Line from Schedule A/B 6.7 | \$150.00 | | \$150.00 | 11 USC § 522(d)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| One (1) dry Line from Schedule A/B 6.8 | \$100.00 | | \$100.00 | 11 USC § 522(d)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| One (1) microwave oven Line from Schedule A/B 7.1 | \$50.00 | | \$50.00 | 11 USC § 522(d)(3) |
| 2.110 110111 25/100410 7/12 111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Two (2) TV Set (22"/\$40.00; 32"/\$100.00) | \$140.00 | | \$140.00 | 11 USC § 522(d)(3) |
| Line from Schedule A/B 7.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing and personal effects Line from Schedule A/B 11.1 | \$400.00 | | \$400.00 | 11 USC § 522(d)(3) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Banco Popular de Puerto Rico Account no. x7177 | \$548.00 | | \$548.00 | 11 USC § 522(d)(10)(A) |
| Checking account (direct deposit Social Security) Line from Schedule A/B 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Firstbank Account no. x4111 | \$10.00 | | \$10.00 | 11 USC § 522(d)(5) |
| Checking account Line from Schedule A/B. 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Coop A/C Las Piedras Account no. x3576 | \$157.00 | | \$157.00 | 11 USC § 522(d)(5) |
| Savings and Shares Line from Schedule A/B 17.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, Debtor 1 Debtor 2 MARIA Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Coop A/C Las Piedras 11 USC § 522(d)(5) \$40.00 \$40.00 Account no x3574 Savings and Shares 100% of fair market value, up to Line from Schedule A/B: 17.4 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350 (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

| Debtor Debtor | | S OYOLA, PEDRO JUAN A | & OYOLA ENCARN | IACIO | Case number (if known) | |
|---|--|--|---|--------------------------------------|--|---|
| Fill in | this inform | ation to identify your case: | | | | |
| Debtor | | ,, | | | | |
| Debioi | • | First Name | Middle Name | L | ast Name |) |
| Debtor | 2 | MARIA OYOLA ENCAR | RNACION | | | |
| (Spouse | if, filing) | First Name | Middle Name | L | ast Name | |
| United | States Ban | kruptcy Court for the: DIST | TRICT OF PUERTO RIC | O, SA | AN JUAN DIVISION | |
| Case r | number | | | | | |
| (if known | | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| Offic | ial For | m 106C | | | | |
| | | | rty Vou Cla | im | ac Evemnt | **** |
| SCI | ledule | C: The Prope | rty You Cla | Ш | as exempt | 4/19 |
| For each specific application funds—to a pair | ch item of p c dollar am ble statuto -may be ur rticular dol | roperty you claim as exempt ount as exempt. Alternatively ry limit. Some exemptions— limited in dollar amount. Ho | t, you must specify the y, you may claim the fu such as those for healt wever, if you claim an o | amou Ill fair th aid: exemp | unt of the exemption you claim. Or market value of the property bein s, rights to receive certain benefits | g exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption |
| Part 1: | Identify | the Property You Claim as I | Exempt | | | |
| 1. W ł | nich set of | exemptions are you claiming | ? Check one only, even | if you | r spouse is filing with you. | |
| | You are cla | iming state and federal nonbanl | kruptcy exemptions. 11 | U.S.C | C. § 522(b)(3) | |
| | You are cla | iming federal exemptions. 11 l | J.S.C. § 522(b)(2) | | | |
| 2. Fo | r any prope | erty you list on Schedule A/E | that you claim as exe | mpt, f | ill in the information below. | |
| | | on of the property and line on hat lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Bri | or 2 Exem ef description the from School | on: | | | | |
| | | | | | 100% of fair market value, up to any applicable statutory limit | |
| | ubject to adj No | ning a homestead exemption ustment on 4/01/22 and every 3 | 3 years after that for case | s filed | I on or after the date of adjustment.) 5 days before you filed this case? | |

| Fill in this infor | mation to iden | tify your case: | | | |
|-------------------------------|------------------|--|---|--|--------------------------|
| Debtor 1 PE | DRO JUAN F | RAMOS OYOLA | | | |
| | Name | Middle Name Last Name | | } | |
| | RIA OYOLA | ENCARNACION | | | |
| (Spouse if, filing) First | Name | Middle Name Last Name | | | |
| United States Bankrupto | y Court for the: | DISTRICT OF PUERTO RICO, SAN JUAN | DIVISION | | |
| Case number | | | | | |
| (if known) | | | | ☐ Check | if this is an |
| | | | | amend | led filing |
| Official Form 106 | SD | | | | |
| | | Who Have Claims Secure | d by Property | ı | 12/15 |
| | | | <u> </u> | <u> </u> | |
| | | f two married people are filing together, both are ed t, number the entries, and attach it to this form. On | | | |
| 1. Do any creditors have cl | aims secured by | your property? | | | |
| ☐ No. Check this bo | x and submit th | is form to the court with your other schedules. You | u have nothing else to rep | ort on this form. | |
| Yes. Fill in all of th | ne information b | elow. | | | |
| Part 1: List All Secur | red Claims | | | | |
| • | | nore than one secured claim, list the creditor separately | Column A | Column B | Column C |
| for each claim. If more than | one creditor has | a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Firstbank Puert | o Rico | Describe the property that secures the claim: | \$24,617.00 | \$79,200.00 | \$0.00 |
| Creditor's Name | | VILLA VICTORIA K16 6 STREET, | | | |
| | | CAGUAS, PR 00725-3457 Debtors owns a residential located | | | |
| | | at Villa Victoria K16 6 Street | | | |
| | | Caguas Puerto Rico; this property | | | |
| | | consists of: two (2) bedrooms, one | | | |
| | | (1) bathroom, living & dining room, kitchen, laundry | | | |
| DO D 0446 | | As of the date you file, the claim is: Check all that | | | |
| PO Box 9146 San Juan, PR 0 | 0908-0146 | apply. ☐ Contingent | | | |
| Number, Street, City, Sta | | ☐ Unliquidated | | | |
| , , , , , , , , , , , , , , | , | ☐ Disputed | | | |
| Who owes the debt? Che | eck one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and Debtor 2 o | = | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debto | | ☐ Judgment lien from a lawsuit | | | |
| Check if this claim rela | ites to a | Other (including a right to offset) | | | |

Last 4 digits of account number

5085

Date debt was incurred 2019-05

| Debtor 1 PEDRO JUAN RAMOS | OYOLA | Case number (f known) | | |
|---|--|-----------------------|-------------|------------|
| First Name Middle N | Name Last Name | | | |
| Debtor 2 MARIA OYOLA ENCAR | RNACION | | | |
| First Name Middle N | Name Last Name | | | |
| 2.2 Toyota Motor Credit Co | Describe the property that secures the claim: | \$25,520.00 | \$21,251.00 | \$4,269.00 |
| Creditor's Name | 2020 Toyota C-HR |] | | |
| | VIN no JTNKHMBX0L1087203 | | | |
| PO Box 9786 | | | | |
| Cedar Rapids, IA | As of the date you file, the claim is: Check all that apply. | at | | |
| 52409-0004 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| ,,,, | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage o | r secured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lier | 2) | | |
| At least one of the debtors and another | ☐ Judgment lien from a lawsuit | ') | | |
| _ | _ | | | |
| ☐ Check if this claim relates to a community debt | ☐ Other (including a right to offset) | | | |
| Date debt was incurred 2020-08 | Last 4 digits of account number 00 | 01 | | |
| | | | | |
| | | | | |
| Add the dellar value of value entries in Co | Jump A on this name Write that number have. | ¢50.427.00 | ถ | |
| If this is the last page of your form, add the | blumn A on this page. Write that number here: | \$50,137.00 | 4 | |
| Write that number here: | ne donar value totals from all pages. | \$50,137.00 |) | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| Fi | II in this info | rmation to identify you | ır case: | | | | |
|---------------------------|------------------------------------|---|-------------------------------------|---|---|--|--|
| Debt | or 1 | PEDRO JUAN RA | MOS OVOL | Δ | | | |
| Dobt | .01 1 | First Name | Middle Na | | | - } | |
| Debt | | MARIA OYOLA E | | | | _ | |
| (Spou | se if, filing) | First Name | Middle Na | ime Last Name | | | |
| Unite | ed States Bar | nkruptcy Court for the: | DISTRICT C | F PUERTO RICO, SAN JUAN | DIVISION | _ | |
| Case | e number | | | | | | |
| (if kno | | | | - | | | check if this is an |
| | | | | | | a | mended filing |
| Offi. | cial Form | 106E/E | | | | | |
| | | | lha Hava | Unaccured Claims | | | 40/45 |
| | | | | Unsecured Claims litors with PRIORITY claims and F | | | 12/15 |
| Sched D: Cre the Co | lule G: Executeditors Who H | ory Contracts and Unexpi ave Claims Secured by Pr age to this page. If you have | ired Leases (Off operty. If more | It in a claim. Also list executory c icial Form 106G). Do not include a space is needed, copy the Part yo in to report in a Part, do not file th | any creditors with partic ou need, fill it out, numb | ally secured claims to per the entries in the | hat are listed in Schedule boxes on the left. Attach |
| Part | 1: List Al | of Your PRIORITY Un | secured Claim | ns | | | |
| 1. [| Oo any credito | rs have priority unsecured | d claims agains | t you? | | | |
| | No. Go to Pa | art 2. | | | | | |
| | ☐ Yes. | | | | | | |
| Dowt | Or Lint All | Laf Varra NONDDIODITY | V II | Nai | | | |
| Part | | l of Your NONPRIORIT | | | | | |
| _ | _ | rs have nonpriority unsec | _ | • | | | |
| L | | re nothing to report in this pa | art. Submit this fo | orm to the court with your other sche | edules. | | |
| | Yes. | | | | | | |
| u | insecured clain han one credito | n, list the creditor separately | for each claim. | abetical order of the creditor who For each claim listed, identify what t tors in Part 3.If you have more than | ype of claim it is. Do not I | list claims already incl | uded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | Citi | | | Last 4 digits of account number | 4190 | | \$4,998.00 |
| | Nonpriority | Creditor's Name | | MII | 0040.00 | | |
| | РО Вох | 6100 | | When was the debt incurred? | 2018-08 | | - |
| | | alls, SD 57117-6190 | | | | | |
| | Number St | reet City State Zip Code | | As of the date you file, the claim | is: Check all that apply | | |
| | Who incur | red the debt? Check one. | | | | | |
| | Debtor | 1 only | | ☐ Contingent | | | |
| | □ Debtor | 2 only | | ☐ Unliquidated | | | |
| | ☐ Debtor | 1 and Debtor 2 only | | ☐ Disputed | | | |
| | ☐ At least | t one of the debtors and and | other | Type of NONPRIORITY unsecure | d claim: | | |
| | | if this claim is for a comm | | Student loans | | | |
| | debt | m subject to offeet? | | Obligations arising out of a sepa | ration agreement or divo | rce that you did not | |
| | _ | m subject to offset? | | report as priority claims Debts to pension or profit-sharir | a plane and other cimils | ır dehte | |
| | ■ No | | | | • | แ นธมเอ | |
| | ☐ Yes | | | Other Specify Credit Care | 0 | | |

Debtor 1 RAMOS OYOLA, PEDRO JUAN & OYOLA Debtor 2 ENCARNACION, MARIA Case number (if known) 4.2 Last 4 digits of account number \$1,977.00 Citi 1560 Nonpriority Creditor's Name When was the debt incurred? 2018-08 PO Box 6190 Sioux Falls, SD 57117-6190 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Discover Fin Svcs LLC** Last 4 digits of account number 8906 \$2,808.00 Nonpriority Creditor's Name When was the debt incurred? 2019-09 PO Box 15316 Wilmington, DE 19850-5316 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another \square Check if this claim is for a community ☐ Student loans debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Credit Card 4.4 **Firstbank** Last 4 digits of account number 5164 \$2,646.00 Nonpriority Creditor's Name When was the debt incurred? 2019-08-12 PO Box 9146 San Juan, PR 00908-0146 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Credit Card

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

Debtor 1 RAMOS OYOLA, PEDRO JUAN & OYOLA Debtor 2 ENCARNACION, MARIA Case number (if known) 4.5 Firstbank Puerto Rico Last 4 digits of account number \$7,535.00 6850 Nonpriority Creditor's Name When was the debt incurred? 2020-03 PO Box 19327 San Juan, PR 00910-1427 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Personal Loan ☐ Yes 4.6 Firstbank Puerto Rico Last 4 digits of account number 2647 \$3,435.00 Nonpriority Creditor's Name When was the debt incurred? 2018-11-01 PO Box 9146 San Juan, PR 00908-0146 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another \square Check if this claim is for a community ☐ Student loans debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Credit Card 4.7 **Island Finance** Last 4 digits of account number 9390 \$10,856.00 Nonpriority Creditor's Name When was the debt incurred? 2019-02-04 PO Box 195369 San Juan, PR 00919-5369 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Personal Loan

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

| | | OYOLA, PEDRO JUAN ACION, MARIA | | Case n | number (if known) | |
|--------------------|---|--|---|---------------|---|-------------------------|
| | | Business Adm. | Last 4 digits of account numbe | r <u>7007</u> | 7 | \$25,000.00 |
| | Nonpriority Cre | ditor's Name | When was the debt incurred? | 03/2 | 7/2018 | |
| | | sport Road | | | ., | |
| - | | , TX 76155-2243 City State Zip Code | As of the date you file, the clair | n is: Chac | k all that apply | |
| | | the debt? Check one. | As of the date you me, the clair | ii is. Chec | к ан тат арргу | |
| | Debtor 1 on | ly | ☐ Contingent | | | |
| | Debtor 2 on | ly | ☐ Unliquidated | | | |
| | Debtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one | of the debtors and another | Type of NONPRIORITY unsecui | ed claim: | | |
| | ☐ Check if thi | is claim is for a community | ☐ Student loans | | | |
| | debt | | 5 | paration a | greement or divorce that you did not | |
| | _ | bject to offset? | report as priority claims | | | |
| | ■ No | | Debts to pension or profit-sha | | and other similar debts | |
| | Yes | | Other. Specify Disaster | Loan | | |
| Part 3: | List Others | s to Be Notified About a De | bt That You Already Listed | | | |
| is tryin have n | ng to collect fro nore than one o | m you for a debt you owe to s | about your bankruptcy, for a debt that omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad or submit this page. | n Parts 1 | or 2, then list the collection agency | here. Similarly, if you |
| | d Address | | On which entry in Part 1 or Part 2 did yo | | 9 | |
| Attorn States | - | of the United | | | Creditors with Priority Unsecured Clair | |
| Merric 950 Pe | k B Garland ennsylvania ngton, DC 2 | Ave NW | | ■ Part 2: | Creditors with Nonpriority Unsecured 0 | Claims |
| | | | Last 4 digits of account number | 7 | 007 | |
| | d Address States Atto | orney District of | On which entry in Part 1 or Part 2 did you Line 4.8 of (Check one): | | original creditor? Creditors with Priority Unsecured Clair | ms |
| PR W. Ste | phen Muldr | ow Esq | | | Creditors with Nonpriority Unsecured C | |
| | 150 Federa | | | | | |
| San Ju | ıan, PR 009 | 17 | Last 4 digits of account number | 7 | 007 | |
| | | | | | | |
| | d Address | s Administration | On which entry in Part 1 or Part 2 did yo | | 9 | |
| PR | iaii busiiles | 55 Administration | Line 4.8 of (Check one): | _ | Creditors with Priority Unsecured Clair Creditors with Nonpriority Unsecured C | |
| 273 Pc | er Assistan once de Leo | on Ste 510 | | ■ Pail 2: | Creations with Monphority Onsecured C | Jaims |
| Hato R | Rey, PR 009 | 17 | Last 4 digits of account number | 7 | 007 | |
| | | | | | | |
| Part 4: | | mounts for Each Type of U | | | | |
| | he amounts of f unsecured cla | | aims. This information is for statistical | reporting | purposes only. 28 U.S.C. §159. Add | the amounts for each |
| | | | | | Total Claim | |
| | 6a. | Domestic support obligation | ıs | 6a. | \$ 0.00 | |
| Total cla | | Taxes and certain other deb | ts you owe the government | 6b. | \$ 0.00 | |
| | 6c. | | I injury while you were intoxicated | 6c. | \$ 0.00 | |
| | 6d. | Other. Add all other priority ur | nsecured claims. Write that amount here. | 6d. | \$ 0.00 | |
| | 6e. | Total Priority. Add lines 6a th | rough 6d. | 6e. | \$ 0.00 | |
| | | | | | Total Claim | · |
| | 6f. | Student loans | | 6f. | \$ 0.00 | |

Debtor 1 RAMOS OYOLA, PEDRO JUAN & OYOLA

Debtor 2 ENCARNACION, MARIA

Case number (if known)

Total claims from Part 2

- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts 6g.
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

| 6g. | \$ 0.00 |
|-----|-----------------|
| 6h. | \$ 0.00 |
| 6i. | \$ 59,255.00 |

6j. 59,255.00

| Fill in this | | | | | | | |
|---------------------|------------------------|--------------------|-------------------------|---|--------------------------------------|--|--|
| Debtor 1 | PEDRO JUAN RAMOS OYOLA | | | | | | |
| | First Name | Middle Name | Last Name |) | | | |
| Debtor 2 | MARIA OYOLA E | NCARNACION | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Bank | ruptcy Court for the: | DISTRICT OF PUERTO | RICO, SAN JUAN DIVISION | | | | |
| Case number | | | | | ☐ Check if this is an amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person o | r company with Name, Number, | whom you have the Street, City, State and ZIP | contract or lease | State what the contract or lease is for |
|-----|----------|---------------------------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | <u> </u> |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |

| F | Il in this information to identify your case: | |
|--|---|--|
| Debtor 1 | PEDRO JUAN RAMOS OYOLA | |
| | First Name Middle Name Last Name |) |
| Debtor 2 | MARIA OYOLA ENCARNACION | |
| (Spouse if, f | ng) First Name Middle Name Last Name | |
| United St | tes Bankruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION | |
| Case nun | ber | |
| (if known) | ··· | ☐ Check if this is an |
| | | amended filing |
| Officia | l Form 106H | |
| | | |
| Sche | lule H: Your Codebtors | 12/15 |
| are filing to and number case num 1. Do No Ye 2. Wi Califor | are people or entities who are also liable for any debts you may have. Be as complete and accurage ther, both are equally responsible for supplying correct information. If more space is needed are the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any over (if known). Answer every question. If you are filing a joint case, do not list either spouse as a codebtor. If you are filing a joint case, do not list either spouse as a codebtor. If the last 8 years, have you lived in a community property state or territory? (Community properting, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Go to line 3. In Did your spouse, former spouse, or legal equivalent live with you at the time? No | , copy the Additional Page, fill it out, Additional Pages, write your name and |
| | Li Yes. | |
| | In which community state or territory did you live? Fill in the name | e and current address of that person. |
| | Name of your spouse, former spouse, or legal equivalent Number, Street, City, State & Zip Code | |
| line 2 | Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedule D, Schedule D, | e creditor on Schedule D (Official Form dule E/F, or Schedule G to fill out creditor to whom you owe the debt dules that apply: |
| | Name ☐ Schedule E/ | F, line |
| | ☐ Schedule G, | line |
| | Number Street | |
| | City State ZIP Code | |
| | | lin a |
| 3.2 | Name | |
| | ☐ Schedule E/ | |
| | | |
| | Number Street | |
| | City State ZIP Code | |

| Fill | in this information t | o identify your ca | se: | | | | | | | | |
|-------------|--|--------------------|---|-------------------------|--------------|---------|------------|----------------|-------------|-----------------------------|------------|
| Del | btor 1 | PEDRO JUA | N RAMOS OYOLA | | | _ | | | | | |
| | btor 2 buse, if filing) | MARIA OYO | LA ENCARNACION | | | _ | | | | | |
| Uni | ited States Bankrup | tcy Court for the: | DISTRICT OF PUERT | TO RICO, SAN JUAN | I | _ | | | | | |
| Cas | se number | | | | | | Chec | k if this is | : | | |
| (If kr | nown) | | | • | | | ΠА | n amende | ed filing | | |
| _ | | | | | | | | | | ng postpetition owing date: | chapter 13 |
| _ | fficial Form | | | | | | N | 1M / DD/ \ | YYYY | | |
| | chedule I: | | ome ble. If two married peop | | | | | | | | 12/15 |
| spo atta | use. If you are sep ch a separate shee | arated and your | re married and not filin spouse is not filing wit n the top of any additio | h you, do not includ | e informa | ation | about y | our spou | ise. If mo | re space is ne | eded, |
| 1. | Fill in your emplinformation. | oyment | | Debtor 1 | | | | Debtor 2 | 2 or non-f | filing spouse | |
| | If you have more t | han one job, | Formular manufacture | ☐ Employed | | | | ☐ Empl | oyed | | |
| | attach a separate information about employers. | | Employment status | ■ Not employed | | | | ■ Not employed | | | |
| | employers. | | Occupation | | | | | Pensio | ned | | |
| | Include part-time, self-employed wor | | Employer's name | | | | | | | | |
| | Occupation may in homemaker, if it a | | Employer's address | | | | | | | | |
| | | | How long employed th | nere? | | | | _ | | | |
| Pai | rt 2: Give De | tails About Mont | thly Income | | | | | | | | |
| | mate monthly inco | | te you file this form. If y | ou have nothing to rep | oort for an | y line, | write \$0 |) in the sp | ace. Inclu | de your non-fili | ng spouse |
| | ou or your non-filing s ce, attach a separate | | than one employer, comb n. | oine the information fo | or all emplo | oyers | for that p | oerson on | the lines I | below. If you ne | eed more |
| | | | | | | | For Deb | otor 1 | | ebtor 2 or ling spouse | |
| 2. | | | ,, and commissions (be alculate what the monthly when t | | 2. | \$_ | | 0.00 | \$ | 500.00 | |
| 3. | Estimate and list | t monthly overting | ne pay. | | 3. | +\$_ | | 0.00 | +\$ | 0.00 | 1 |
| 4. | . Calculate gross Income. Add line 2 + line 3. | | | | 4. | \$ | | 0.00 | S | 500.00 | |

Case number (if known)

| | 0 | . Uma Albana | 4 | | Debtor 1 | non-fi | ebtor 2 or ling spouse | |
|-----|-------------------|---|-------------------|------------|--------------------------|----------|---------------------------|----------|
| | Сору | line 4 here | 4. | \$_ | 0.00 | \$ | 500.00 | |
| 5. | List a | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 0.00 | \$ | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: RC-Pres Cult Ret Cen-Em Clasif | 5h.+ | \$ | | + \$ | 86.68 | |
| | | RC-Pres Pers Ret Cen-E Clasif | | \$ | 0.00 | \$ | 111.22 | |
| | | AS-Asoc Pensionados | | \$ | 0.00 | \$ | 2.00 | |
| 6. | Add t | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 0.00 | \$ | 199.90 | |
| 7. | Calcu | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 0.00 | \$ | 300.10 | |
| 8. | List a 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ _ | 0.00 | \$ | 0.00 | |
| | 8c. 8d. 8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security | 8c. 8d. 8e. | \$_ \$_ | 0.00 0.00 1,118.50 | \$ \$ | 0.00 0.00 896.50 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: PAN | 8f. | \$ | 98.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | — 8g. | \$- | 0.00 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: | 8h.+ | · - | | · \$ | 0.00 | |
| 9. | Add a | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,216.50 | \$ | 896.50 | |
| | | | [- | | | | | |
| 10. | | ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ | | 1,216.50 + \$_ | 1,19 | 6.60 | 2,413.10 |
| 11. | Includ other | all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not average. | ependent | | | | ∍ J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain | | | | | 12. \$2 | 2,413.10 |
| 13. | Do vo | ou expect an increase or decrease within the year after you file this form | ? | | | | Combine monthly | |
| | | No. | | | | | | |
| | | Yes. Explain: NONE | | | | | | |

| Fill | in this informa | tion to identify yo | ur case: | | | | | | |
|------------|--|---------------------------------------|----------------------------|---|----------------------|--|-----------------|-------------------------------|---|
| Deb | otor 1 | PEDRO JUA | N RAMO | S OYOLA | | Che | ck if this is: | | |
| | Debtor 2 MARIA OYOLA ENCARNACION (Spouse, if filing) | | | | | ring postpetition chapter 13 following date: | | | |
| | | ruptcy Court for the: | DISTRI DIVISIO | CT OF PUERTO RICO, SA | N JUAN | | MM / DD / YYYY | | |
| 1 | e number nown) | | | | | | | | |
| O | fficial Fo | orm 106J | | | | | | | |
| S | chedule | J: Your I | Expen | ses | | | | 12/1 | 5 |
| Be info | as complete a | and accurate as | possible. eded, attac | f two married people are th another sheet to this fo | | | | | r |
| Par | | ibe Your House | hold | | | | | | |
| 1. | Is this a joir | | | | | | | | |
| | □ No. Go to | | | (. l l. 10 | | | | | |
| | | s Debtor 2 live in | n a separa | te nousenoia? | | | | | |
| | ■ N □ Y | | st file Officia | al Form 106J-2, <i>Expenses f</i> | or Separate Househ | oldof Debto | r 2. | | |
| 2. | Do you have | e dependents? | ■ No | | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relation | | Dependent's age | Does dependent live with you? | |
| | Do not state | the | | | | | | □ No | |
| | dependents | names. | | | | | | Yes | |
| | | | | | | | | □ No | |
| | | | | | - | | _ | ☐ Yes ☐ No | |
| | | | | | | | | ☐ Yes | |
| | | | | | | | | □ No | |
| | | | | | | | | ☐ Yes | |
| 3. | | penses include | | No | | | | | |
| | | f people other th d your dependei | | Yes | | | | | |
| | | | | | | | | | |
| exp | imate your ex | | ur bankru | y Expenses ptcy filing date unless yo is filed. If this is a supple | | | | | |
| val | | sistance and ha | | overnment assistance if y d it on Schedule I: Your II | | | Your exp | enses | |
| • | | , | | | | | | | |
| 4. | | or home owners! d any rent for the | | ses for your residence. Indoor. ot. | clude first mortgage | 4. \$ | S | 338.00 | |
| | If not includ | led in line 4: | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | 5 | 0.00 | |
| | | rty, homeowner's, | or renter's | insurance | | 4b. \$ | | 0.00 | |
| | • | maintenance, re | | | | 4c. § | | 50.00 | |
| | | owner's associati | | | | 4d. § | | 0.00 | |
| 5. | Additional r | nortgage payme | nts for yo | ur residence, such as hom | e equity loans | 5. \$ | 6 | 0.00 | |

RAMOS OYOLA, PEDRO JUAN & OYOLA Debtor 1 Debtor 2 **ENCARNACION, MARIA** Case number (if known) 6. **Utilities:** Electricity, heat, natural gas 6a. \$ 6a. 180.00 6b. 6b. \$ Water, sewer, garbage collection 100.00 6c. \$ 6c. Telephone, cell phone, Internet, satellite, and cable services 70.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 424.50 Childcare and children's education costs 8. \$ 0.00 9. Clothing, laundry, and dry cleaning 9. \$ 0.00 10. Personal care products and services 10. \$ 120.00 11. Medical and dental expenses 11. \$ 100.00 12. Transportation. Include gas, maintenance, bus or train fare. 180.00 12. \$ Do not include car payments. 20.00 Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations 14. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 0.00 15b. Health insurance 15b. \$ 297.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance. Specify: Cancer 15d. \$ 30.00 S VIDA 10.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 442.60 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l). Other payments you make to support others who do not live with you. 0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ Security Alarm 51.00 Baber & Beauty +\$ 30.00 +\$ 30.00 Gas 22. Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 2,473.10 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$ 22c. Add line 22a and 22b. The result is your monthly expenses. 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a \$ 2,413.10 23b. Copy your monthly expenses from line 22c above. 23b. 2,473.10 23c. Subtract your monthly expenses from your monthly income. -60.00 The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

| For example, do you expect | to finish paying for | your car loan | within the year of | or do you expect | your mortgage | payment to increase or | decrease because of a |
|------------------------------|----------------------|---------------|--------------------|------------------|---------------|------------------------|-----------------------|
| modification to the terms of | your mortgage? | | | | | | |

| Ш | No. |
|---|-----|
|---|-----|

■ Yes. Explain here: NONE

| Fill in this in | formation to identify ye | our case. | | | | |
|--|--|--|----------------|--------------------------------|---|---|
| Debtor 1 | | | | | | |
| Debiori | PEDRO JUAN RA | Middle Name | Las | t Name | - \ | |
| Dobtor 0 | | | Las | riane | İ | |
| Debtor 2 (Spouse if, filing) | MARIA OYOLA E | Middle Name | Lac | t Name | _ | |
| (Spouse II, IIIIIIg) | i iist ivaille | Wildule Name | Las | trane | | |
| United States Bar | nkruptcy Court for the: | DISTRICT OF PUERTO | D RICO, SAN | JUAN DIVISION | _ | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check if this is an | I |
| | | | | | amended filing | |
| If two married peo You must file this | ople are filing together s form whenever you fi | both are equally response bankruptcy schedules | nsible for sup | | statement, concealing property, o 0,000, or imprisonment for up to 2 | |
| Sign | n Below | | | | | |
| Did you pay | or agree to pay some | one who is NOT an attor | ney to help y | ou fill out bankruptcy forms | ? | |
| ■ No | | | | | | |
| ☐ Yes. N | lame of person | | | | n Bankruptcy Petition Preparer's No ration, and Signature (Official Form | |
| | ty of perjury, I declare true and correct. | that I have read the sum | mary and sc | hedules filed with this declar | ration and | |
| X /s/ PED | RO JUAN RAMOS | OYOLA | х | /s/ MARIA OYOLA ENC | ARNACION | |
| | JUAN RAMOS OY | | | MARIA OYOLA ENCARI | | |
| | e of Debtor 1 | - | | Signature of Debtor 2 | | |
| Date N | November 9, 2021 | | | Date November 9, 202 | 1 | |

| | Fill in th | is information to identify your case: | | | |
|---------------------|--|--|-------|---------|---------------------------------|
| Del | otor 1 | PEDRO JUAN RAMOS OYOLA | | | |
| L . | | First Name Middle Name Last Name | | | |
| | otor 2 ouse if, filing) | MARIA OYOLA ENCARNACION First Name Middle Name Last Name | | | |
| Uni | ted States Ba | nkruptcy Court for the: DISTRICT OF PUERTO RICO, SAN JUAN DIVISION | | | |
| Cas | se number | | | | |
| | nown) | | | | ck if this is an nded filing |
| ∩f | ficial Fo | rm 106Sum | | | |
| | | of Your Assets and Liabilities and Certain Statistical Information | | | 12/15 |
| Be a info you | s complete a rmation. Fill o r original forn | nd accurate as possible. If two married people are filing together, both are equally responsible for so but all of your schedules first; then complete the information on this form. If you are filing amended ns, you must fill out a new Summary and check the box at the top of this page. arize Your Assets | | | |
| | | | Y | our ' | assets |
| | | | V | /alue | of what you own |
| 1. | | /B: Property (Official Form 106A/B) e 55, Total real estate, from Schedule A/B | ; | \$ | 79,200.00 |
| | 1b. Copy lin | e 62, Total personal property, from Schedule A/B | ! | \$ | 25,096.00 |
| | 1c. Copy line | e 63, Total of all property on Schedule A/B | ! | \$ | 104,296.00 |
| Par | t 2: Summ | arize Your Liabilities | | | |
| | | | | | liabilities nt you owe |
| 2. | | Creditors Who Have Claims Secured by Property (Official Form 106D) e total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D | : | \$ | 50,137.00 |
| 3. | | F: Creditors Who Have Unsecured Claims (Official Form 106E/F) e total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F | | \$ | 0.00 |
| | 3b. Copy th | e total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F | | \$ | 59,255.00 |
| | | Your total liabilities | \$_ | | 109,392.00 |
| Par | t 3: Summ | arize Your Income and Expenses | | | |
| 4. | | Your Income(Official Form 106I) ombined monthly income from line 12 oSchedule I | | \$ | 2,413.10 |
| 5. | | Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J | : | \$ | 2,473.10 |
| Par | t 4: Answe | r These Questions for Administrative and Statistical Records | | | |
| 6. | - | ng for bankruptcy under Chapters 7, 11, or 13? u have nothing to report on this part of the form. Check this box and submit this form to the court with your ot | her s | sched | lules. |
| 7. | Yes What kind o | of debt do you have? | | | |
| | | lebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a pee." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159. | ersor | ∩al, fa | amily, or household |

Official Form 106Sum Summa

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

598.00

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clain | n |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | Fill i | n this information to ident | ify your case: | | | | | | |
|---------------------|---|---|--|---|--|---|--|--|--|
| Deb | otor 1 | PEDRO JUAN R | AMOS OYOLA | | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| | otor 2 ouse if, filing | MARIA OYOLA First Name | ENCARNACION Middle Name | Last Name | | | | | |
| | _ | es Bankruptcy Court for the: | DISTRICT OF PUERTO RIC | | | | | | |
| | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | , | | | | | |
| | se numbe | er | | | | Check if this is an amended filing | | | |
| Sta Be a info | atemons complements | lete and accurate as possib | Affairs for Individuole. If two married people are fiattach a separate sheet to this | iling together, both are e | equally responsible for supp | | | | |
| ` | | | rital Status and Where You Liv | ved Before | | | | | |
| 1. | What is | s your current marital statu | s? | | | | | | |
| | _ | arried ot married | | | | | | | |
| 2. | During the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | ■ No | | ved in the last 3 years. Do not incl | lude where you live now. | | | | | |
| | Debtor | r 1 Prior Address: | Dates Debtor 1 live there | Debtor 2 Prior Ad | ddress: | Dates Debtor 2 lived there | | | |
| 3. state | | | rer live with a spouse or legal of ifornia, Idaho, Louisiana, Nevad | | | | | | |
| | ■ No |) | | | | | | | |
| | ☐ Ye | s. Make sure you fill out <i>Sch</i> | edule H: Your Codebtors (Officia | l Form 106H). | | | | | |
| Par | t 2 E | explain the Sources of You | r Income | | | | | | |
| 4. | Fill in th | e total amount of income yo re filing a joint case and you h | nployment or from operating a u received from all jobs and all b have income that you receive toge | usinesses, including part- | time activities. | ndar years? | | | |
| | ☐ Ye | es. Fill in the details. | | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |

| Debtor 2 | MA | RIA | | | | Cas | e number (if known) | | |
|---|---------------------|-----------------------------------|----------------------------------|---|--------------------------------------|--|--|----------------|---|
| Inclu othe | ide inc r public | ome regard benefit pa | lless of whethe yments; pensi | e during this year or the twer that income is taxable. Exaons; rental income; interest; we income that you received | amples of <i>oti</i> dividends; n | <i>her income</i> are alim noney collected from | lawsuits; royalties; | | |
| List 6 | each s | ource and t | he gross incor | me from each source separa | ately. Do not | include income that | you listed in line 4. | | |
| | No | | | | | | | | |
| | Yes. F | Fill in the d | etails. | | | | | | |
| | | | | Debtor 1 Sources of income Describe below. | each | s income from source e deductions and ions) | Debtor 2 Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| | | 1 of curre led for bar | nt year until nkruptcy: | Social Security Benefits | | \$12,303.50 | Social Securi Benefits | ity | \$8,965.00 |
| | | | | | | \$0.00 | Pension | | \$4,650.05 |
| | | | | PAN | | \$1,078.00 | | | |
| For last calendar year: (January 1 to December 31, 2020) | | Social Security Benefits | | \$13,422.00 | Social Securi Benefits | ity | \$10,627.20 | | |
| | | | | | | \$0.00 | Pension | | \$6,000.00 |
| | | | | PAN | | \$1,176.00 | | | |
| | | ar year be December | | Social Security Benefits | | \$13,038.00 | Social Securi Benefits | ity | \$10,458.00 |
| | | | | | | \$0.00 | Pension | | \$6,000.00 |
| Part 3: | List | Certain Pa | ovments You | Made Before You Filed fo | or Bankrupto | ev | | | |
| 6. Are | either | Debtor 1's Neither D | or Debtor 2' ebtor 1 nor D | s debts primarily consume lebtor 2 has primarily cons personal, family, or househo | er debts? sumer debt | s. Consumer debts | are defined in 11 U | .S.C. § 101(8 | 3) as "incurred by an |
| | | _ | 90 days before | re you filed for bankruptcy, d | did you pay a | ny creditor a total of | \$6,825* or more? | | |
| | | □ _{No.} □ _{Yes} | Go to line 7 | 7. each creditor to whom you pa | aid a tatal of | tc coex or more in a | | ata and the te | tal amount vay paid that |
| | | | creditor. Do payments to | o not include payments for co o an attorney for this bankrup on 4/01/22 and every 3 year | domestic sup ptcy case. | pport obligations, su | ich as child support | t and alimony | , , |
| • | Yes. | Debtor 1 | or Debtor 2 o | r both have primarily cons | sumer debt | S. | · | dolinon. | |
| | | _ | , | | aid you pay a | ny creditor a total or | φοσο οι more: | | |
| | | ■ No. □ Yes | Go to line 7 | | oid a total of | \$600 or more and th | o total amount valu | noid that are | ditor. Do not include |
| | | i res | | each creditor to whom you pa or domestic support obligation ptcy case. | | | | | |
| Cre | ditor's | s Name an | d Address | Dates of payr | ment | Total amount paid | Amount you still owe | Was this p | payment for |

RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION,

Debtor 1 Debtor 2

| | btor 1 btor 2 | RAMOS OYOLA, PEDRO JUAN & MARIA | OYOLA ENCARNAC | | e number (if known |) | |
|-----|---------------------|---|---|---|--------------------------------------|--|---|
| 7. | <i>Inside</i> which | in 1 year before you filed for bankruptcy ers include your relatives; any general partne i you are an officer, director, person in contri ess you operate as a sole proprietor. 11 U.S | ers; relatives of any general ol, or owner of 20% or more | partners; partnershipe of their voting secu | ps of which you a rities; and any ma | re a general part anaging agent, ir | ner; corporations of cluding one for a |
| | _ | No Yes. List all payments to an insider. | | | | | |
| | Insid | der's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | insid | in 1 year before you filed for bankruptcy er? de payments on debts guaranteed or cosigne | | nents or transfer an | y property on a | ccount of a del | ot that benefited an |
| | _ | No Yes. List all payments to an insider | | | | | |
| | | der's Name and Address | Dates of payment | Total amount | Amount you | Reason for | this payment |
| Pa | rt 4: | Identify Legal Actions, Repossessions, | and Foreclosures | paid | still owe | molade cred | iiioi s name |
| 9. | List a and c | in 1 year before you filed for bankruptcy Il such matters, including personal injury cas ontract disputes. No Yes. Fill in the details. | | | | | |
| | | e title e number | Nature of the case | Court or agency | | Status of th | e case |
| 10. | Chec | in 1 year before you filed for bankruptcy k all that apply and fill in the details below. No. Go to line 11. | , was any of your proper | ty repossessed, fo | reclosed, garnis | hed, attached, | seized, or levied? |
| | | Yes. Fill in the information below. | | | | | |
| | Cred | litor Name and Address | Describe the Property Explain what happened | | Date | | Value of the property |
| 11. | acco | in 90 days before you filed for bankrupto unts or refuse to make a payment becau No | y, did any creditor, inclu | iding a bank or fina | ncial institution | , set off any an | nounts from your |
| | _ | Yes. Fill in the details. | | | | | |
| | Cred | ditor Name and Address | Describe the action the | creditor took | Date take | e action was en | Amount |
| 12. | | in 1 year before you filed for bankruptcy -appointed receiver, a custodian, or ano | | ty in the possessio | on of an assigned | e for the benefi | t of creditors, a |
| | | No | | | | | |
| - | | Yes | | | | | |
| | rt 5: | List Certain Gifts and Contributions | | with a total value a | f and the an #60 | 0 2 | |
| 13. | _ | n 2 years before you filed for bankrupto No | y, did you give any gifts | with a total value o | or more than \$60 | u per person? | |
| | | Yes. Fill in the details for each gift. | | | | | |
| | Gifts | s with a total value of more than \$600 pe con | r Describe the gifts | | | es you gave gifts | Value |
| | | son to Whom You Gave the Gift and | | | | | |

| Debt Debt | • | AN & O | YOLA ENCARNACION, Case numl | DEF (if known) | |
|--------------|---|----------|---|---|---------------------------|
| I | Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift or co | | did you give any gifts or contributions with a to | stal value of more than \$ | 6600 to any charity? |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cook | | Describe what you contributed | Dates you contributed | Value |
| Part | 6: List Certain Losses | | | | |
| | Within 1 year before you filed for bankru or gambling? | iptcy or | since you filed for bankruptcy, did you lose ar | ything because of theft | , fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | | |
| | Describe the property you lost and how the loss occurred | Includ | ibe any insurance coverage for the loss e the amount that insurance has paid. List pendin nce claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Part | 7: List Certain Payments or Transfer | | nee claims on line 33 Glochedule 7/B. Property. | | |
| (- | consulted about seeking bankruptcy or | preparir | d you or anyone else acting on your behalf paring a bankruptcy petition? or credit counseling agencies for services required Description and value of any property transferred | | Amount of payment |
| | Person Who Made the Payment, if Not N Roberto Figueroa Carrasquillo, Es PO Box 0186 Caguas, PR 00726-0186 | | Pre-bankruptcy fees deposit | 10/12/2021 | \$1,100.00 |
| - | CIN Legal Data Services 4540 Honeywell Ct Dayton, OH 45424-5760 | | Pre-filing bankruptcy Credit Report | 10/17/2021 | \$74.00 |
| - | DebtorCC 378 Summit Ave Jersey City, NJ 07306-3110 | | Pre-bankruptcy Counseling Certificate | e 11/9/2021 | \$19.95 |
| - | Within 1 year before you filed for bankrupromised to help you deal with your creed not include any payment or transfer that | ditors o | | or transfer any proper | ty to anyone who |
| I | Yes. Fill in the details. | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

| | otor 1 otor 2 | · · · · · · · · · · · · · · · · · · · | | | | | Case number (if known) | | | |
|-----|------------------------|---|---------|--|-------------------|--------------|--|-------|---|--|
| | | and transfers that you have already listed on No | on this | statement. | | | | | | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Pers Add | on Who Received Transfer ress | | Description and property transfer | | paym | ribe any property or nents received or debts in exchange | | Oate transfer was nade | |
| | Pers | son's relationship to you | | | | | | | | |
| | | los Antonio Torres Navarro aynabo, PR | | 2005 Toyota C \$4,600.00 | orolla | | 00.00 value received ransfer. | Þ | August/2020 | |
| | Nor | ne relationship to Debtors | | | | | | | | |
| 19. | bene | in 10 years before you filed for bankru ficiary? (These are often called asset-pro No | | | y property to a | self-settled | d trust or similar device o | of wh | nich you are a | |
| | | Yes. Fill in the details. | | | | | | | | |
| | Nam | ne of trust | | Description and | value of the pro | perty trans | sferred | _ | Date Transfer was | |
| D | 4.0- | List of Certain Financial Accounts, In | _4 | anta Cafa Damasit | Davis and Cta | | | | | |
| 20. | sold, Inclu hous | in 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes. Fill in the details. | or oth | er financial accour | nts; certificates | of deposit; | | | | |
| | | ne of Financial Institution and ress (Number, Street, City, State and ZIP | | st 4 digits of count number | Type of acco | ount or | Date account was closed, sold, moved, or transferred | | ast balance before closing or transfer | |
| 21. | | ou now have, or did you have within 1 , or other valuables? | year I | pefore you filed for | bankruptcy, ar | ıy safe dep | osit box or other deposi | tory | for securities, | |
| | _ | No Yes. Fill in the details. | | | | | | | | |
| | | ne of Financial Institution ress (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, and ZIP Code) | | Describe | the contents | | Do you still have it? | |
| 22. | Have | you stored property in a storage unit | or pla | ce other than your | home within 1 | year before | e you filed for bankruptc | y? | | |
| | _ | No Yes. Fill in the details. | | | | | | | | |
| | | ne of Storage Facility ress (Number, Street, City, State and ZIP Code) | | Who else has or to it? Address (Number, and ZIP Code) | | Describe | the contents | | Do you still have it? | |
| Par | t 9: | Identify Property You Hold or Contro | l for S | omeone Else | | | | | | |
| 23. | Do yo | ou hold or control any property that so eone. | omeor | ne else owns? Inclu | ude any propert | y you borr | owed from, are storing fo | or, o | r hold in trust for | |
| | _ | No Yes. Fill in the details. | | | | | | | | |
| | | ner's Name ress (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value | |

| | otor 1 otor 2 | , | & O | YOLA ENCARNACION, | Cas | se number (if known) | | |
|-----|------------------|---|---------|--|-------|--|-----------------------|--|
| Par | t 10: | Give Details About Environmental Int | orma | ition | | | | |
| For | the p | ourpose of Part 10, the following definiti | ons a | apply: | | | | |
| | toxi | rironmental law means any federal, state c substances, wastes, or material into t trolling the cleanup of these substance | he air | , land, soil, surface water, groundwa | | | | |
| | | means any location, facility, or propert | - | - | w, w | hether you now own, operate, or | utilize it or used to | |
| | | ardous material means anything an enverial, pollutant, contaminant, or similar | | | /aste | e, hazardous substance, toxic sul | bstance, hazardous | |
| Rep | ort a | Il notices, releases, and proceedings th | at yo | u know about, regardless of when th | ney | occurred. | | |
| 24. | Has | any governmental unit notified you that | t you | may be liable or potentially liable u | ınde | er or in violation of an environmer | ntal law? | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | I | Environmental law, if you know it | Date of notice | |
| 25. | Hav | e you notified any governmental unit o | any | release of hazardous material? | | | | |
| | | No Yes. Fill in the details. | | | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | | Governmental unit Address (Number, Street, City, State and ZIP Code) | I | Environmental law, if you know it | Date of notice | |
| 26. | Hav | e you been a party in any judicial or ad | minis | trative proceeding under any enviro | onm | ental law? Include settlements an | d orders. | |
| | | No Yes. Fill in the details. | | | | | | |
| | | se Title se Number | | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case | |
| Par | t 11: | Give Details About Your Business or | Con | nections to Any Business | | | | |
| 27. | With | nin 4 years before you filed for bankrup | tcy, c | lid you own a business or have any | of t | he following connections to any I | ousiness? | |
| | | \square A sole proprietor or self-employed | in a tı | rade, profession, or other activity, e | ithe | r full-time or part-time | | |
| | | ☐ A member of a limited liability com | oany | (LLC) or limited liability partnership | (LL | _P) | | |
| | | ☐ A partner in a partnership | | | | | | |
| | | ☐ An officer, director, or managing ex | ecuti | ve of a corporation | | | | |
| | | ☐ An owner of at least 5% of the votin | g or | equity securities of a corporation | | | | |
| | | No. None of the above applies. Go to | Part 1 | 2. | | | | |
| | | Yes. Check all that apply above and fil | l in th | ne details below for each business. | | | | |
| | | siness Name dress | De | scribe the nature of the business | | Employer Identification number | | |
| | | Address (Number, Street, City, State and ZIP Code) | | ame of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | |

| Debto Debto | , , | & OYOLA ENCAF | RNACION, Case number | er (if known) |
|---|--|--|---|--|
| | Vithin 2 years before you filed for bankrupt nstitutions, creditors, or other parties. | cy, did you give a fi | nancial statement to anyone abo | out your business? Include all financial |
| | _ 140 | | | |
| 4 | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| Part 1 | 12: Sign Below | | | |
| true ar bankru 18 U.S /s/ PI PEDF | | e statement, concea 10, or imprisonment /s/ MAR MARIA | ling property, or obtaining mone for up to 20 years, or both. IA OYOLA ENCARNACION DYOLA ENCARNACION | der penalty of perjury that the answers are ey or property by fraud in connection with a |
| _ | | Signature | e of Debtor 2 | |
| Date | November 9, 2021 | _ | November 9, 2021 | |
| | November 9, 2021 ou attach additional pages to Your Stateme | Date | November 9, 2021 | ruptcy (Official Form 107)? |

| Fill in this information to identify your case: | | | box only as dire | cted in this for | m and in Form |
|---|--|--|---|--|---|
| Debtor 1 PEDRO JUAN RAMOS OYOLA | | 122A-1Sup | p: | | |
| Debtor 2 (Spouse, if filing) MARIA OYOLA ENCARNACION | | . 📘 🗖 1. Th | ere is no presum | nption of abuse |) |
| United States Bankruptcy Court for the: District of Puerto Division | Rico, San Juan | ap | | de under <i>Chapi</i> | presumption of abuse ter 7 Means Test 2). |
| Case number (if known) | | | e Means Test do litary service but | | ow because of qualified later. |
| | | □ Che | ck if this is an | amended fili | ng |
| Official Form 122A - 1 | | | | | |
| Chapter 7 Statement of Your Cu | rrent Month | ly Income | | | 04/20 |
| Be as complete and accurate as possible. If two married people a separate sheet to this form. Include the line number to which to number (if known). If you believe that you are exempted from a military service, complete and file Statement of Exemption from Part 1: Calculate Your Current Monthly Income | the additional information presumption of abuse b | on applies. On the to ecause you do not | pp of any additior nave primarily co | nal pages, write nsumer debts o | your name and case or because of qualifying |
| · · · · · · · · · · · · · · · · · · · | nh. | | | | |
| What is your marital and filing status? Check one or Not married. Fill out Column A, lines 2-11. | riiy. | | | | |
| ■ Married and your spouse is filing with you. Fill o | out both Columns A an | d B lines 2-11 | | | |
| ☐ Married and your spouse is NOT filing with you. | | | | | |
| ☐ Living in the same household and are not lega | , , | | and B, lines 2-11 | | |
| Living separately or are legally separated. Fill penalty of perjury that you and your spouse are le apart for reasons that do not include evading the | egally separated under i | nonbankruptcy law | that applies or th | • | |
| Fill in the average monthly income that you received from al 101(10A). For example, if you are filing on September 15, the 6-6 months, add the income for all 6 months and divide the total by own the same rental property, put the income from that property | month period would be M | arch 1 through Augus ot include any income | t 31. If the amount amount that | t of your monthly in once. For exar | vincome varied during the mple, if both spouses |
| | | Columi Debtor | 1 | Column B Debtor 2 or non-filing spo | ouse |
| Your gross wages, salary, tips, bonuses, overtime, payroll deductions). | and commissions (b | efore all \$ | 0.00 | \$500 | 0.00 |
| Alimony and maintenance payments. Do not include Column B is filled in. | e payments from a spo | use if \$ | 0.00 | \$ | 0.00 |
| 4. All amounts from any source which are regularly poof you or your dependents, including child support from an unmarried partner, members of your household roommates. Include regular contributions from a spous Do not include payments you listed on line 3 | t. Include regular contr , your dependents, par | ributions ents, and | 0.00 | \$ | 0.00 |
| 5. Net income from operating a business, profession, | | | | | |
| Gross receipts (before all deductions) | \$ 0.00 -\$ 0.00 | | | | |
| Ordinary and necessary operating expenses Net monthly income from a business, profession, or fa | 0.00 | py here -> \$ | 0.00 | \$ | 0.00 |
| 6. Net income from rental and other real property | ψ | · - | | | |
| | Debtor 1 | I | | | |
| Gross receipts (before all deductions) | \$ 0.00 | | | | |
| Ordinary and necessary operating expenses | -\$ 0.00 | b | 0.00 | Φ | 0.00 |
| Net monthly income from rental or other real property | \$ <u>0.00</u> Co | py here -> \$ | | <u></u> | 0.00 0.00 |
| 7. Interest, dividends, and royalties | | \$ | 0.00 | . (| J.UU |

7. Interest, dividends, and royalties

Debtor 1 Debtor 2 RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION, MARIA

Case number (if known)

| | | | | Column A Debtor 1 | | | | | |
|------|--|---|---|--|--------------|--------------|---------------------|--|---|
| 8. | Unemployment comper | nsation | | | \$ | 0.00 | \$ | 0.00 | |
| | Do not enter the amount in Social Security Act. Inste | f you contend that the amount read, list it here: | eceived was a benefit und | ler the | | | | | |
| | | \$ | | <u>) </u> | | | | | |
| | For your spouse | \$ | 896.50 | <u>)</u> | | | | | |
| | under the Social Security include any compensation Government in connection a member of the uniforme 61 of title 10, then include of retired pay to which you title 10 other than chapte | | States eath of apter count of | \$ | 0.00 | \$ | 0.00 | | |
| 10. | Do not include any benefit under the Federal law relational Emergical and the National Emergical English and the National | ources not listed above. Spets received under the Social Secting to the national emergency of gencies Act (50 U.S.C. 1601 et (COVID-19); payments receive or international or domestic terrallowance paid by the United Steelated injury or disability, or deathers and the sessary, list other sources on a second term of the second terms. | curity Act; payments made declared by the President seq.) with respect to the ed as a victim of a war crin forism; or compensation ates Government in conne th of a member of the | e me, a ection | | | | | |
| | Nutritional A | ssistance Program (PAN) | | _ | \$ | 98.00 | \$ | 0.00 | |
| | | | | _ | \$ | 0.00 | \$ | 0.00 | |
| | Total amounts fr | om separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 | |
| 11. | | rent monthly income. Add line the total for Column A to the tot | | \$ | 98.00 | + \$ | 500.00 | = \$ 598.00 Total current monthl income | y |
| Part | 2: Determine Wheth | ner the Means Test Applies to | You | | | | | | |
| 12. | Calculate your current | monthly income for the year. | Follow these steps: | | | | | | |
| | 12a. Copy your total curr | ent monthly income from line 1 | 1 | | Сору | y line 11 h | ere=> | \$598.00 | |
| | Multiply by 12 (the r | number of months in a year) | | | | | | x 12 | _ |
| | 12b. The result is your ar | nual income for this part of the | form | | | | 12b. | \$7,176.00 | - |
| 13. | Calculate the median fa | mily income that applies to y | ou. Follow these steps: | | | | | | |
| | Fill in the state in which ye | ou live. | PR | | | | | | |
| | Fill in the number of peop | ole in your household. | 2 | | | | | | _ |
| | To find a list of applicable | ncome for your state and size of median income amounts, go of eavailable at the bankruptcy control of the same are available. | online using the link spec | cified in | the separat | te instructi | 13. ons for this | \$24,973.00 | |
| 14. | How do the lines compa | are? | | | | | | | |
| | Go to Part 3 | less than or equal to line 13. On B. Do NOT fill out or file Official | Form 122A-2. | | | · | | | |
| | | more than line 13. On the top o and fill out Form 122A-2. | f page 1, check box <i>2Ţhe</i> | e presur | mption of ab | ouse is dete | ermined by For | rm 122A-2. | |
| Part | 3: Sign Below | | | | | | | | |
| | By signing here, I de | eclare under penalty of perjury th | nat the information on this | statem | ent and in a | ny attachm | nents is true and | d correct. | |

| Debtor 1 Debtor 2 | ENCARNACION, MARIA | Case number (if known) |
|----------------------|------------------------------|-------------------------------|
| | X /s/ PEDRO JUAN RAMOS OYOLA | X /s/ MARIA OYOLA ENCARNACION |

PEDRO JUAN RAMOS OYOLA MARIA OYOLA ENCARNACION

Signature of Debtor 1 Signature of Debtor 2 Date November 9, 2021 Date November 9, 2021 MM / DD / YYYY MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Certificate Number: 15725-PR-CC-036126205



CERTIFICATE OF COUNSELING

I CERTIFY that on November 9, 2021, at 11:03 o'clock AM EST, Pedro Juan Ramos Oyola received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of Puerto Rico, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: November 9, 2021

By: /s/Carlos Cervera

Name: Carlos Cervera

Title: Issuer

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Certificate Number: 15725-PR-CC-036126207



CERTIFICATE OF COUNSELING

I CERTIFY that on November 9, 2021, at 11:03 o'clock AM EST, Maria Oyola Encarnacion received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of Puerto Rico, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

| Date: | November 9, 2021 | By: | /s/Carlos Cervera |
|-------|------------------|--------|-------------------|
| | | Name: | Carlos Cervera |
| | | Title: | Issuer |

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte | r 7: | Liquidation |
|----------|-------|--------------------|
| | \$245 | filing fee |
| | \$78 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| | \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Puerto Rico, San Juan Division

| | District of Puerto Rico | , San Juan Division | |
|------------|---|--|---|
| In | RAMOS OYOLA, PEDRO JUAN & OYOLA ENCARNACION Debt | tor(s) Case Chap | |
| | DISCLOSURE OF COMPENSATION | OF ATTORNEY FO | R DEBTOR |
| l. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify th compensation paid to me within one year before the filing of the petitio be rendered on behalf of the debtor(s) in contemplation of or in connect | n in bankruptcy, or agreed to b | e paid to me, for services rendered or to |
| | For legal services, I have agreed to accept | \$ | 1,100.00 |
| | Prior to the filing of this statement I have received | | 1,100.00 |
| | Balance Due | | 0.00 |
| 2. | The source of the compensation paid to me was: | | |
| | ■ Debtor □ Other (specify): | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ■ Debtor □ Other (specify): | | |
| 1. | ■ I have not agreed to share the above-disclosed compensation with a firm. | ny other person unless they are | members and associates of my law |
| | ☐ I have agreed to share the above-disclosed compensation with a per copy of the agreement, together with a list of the names of the peop | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal servi | ice for all aspects of the bankru | ptcy case, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to tb. Preparation and filing of any petition, schedules, statement of affairsc. Representation of the debtor at the meeting of creditors and confirmd. [Other provisions as needed] | and plan which may be requir | ed; |
| 5 . | By agreement with the debtor(s), the above-disclosed fee does not inclu | de the following service: | |
| | CERTIFICA | TION | |
| thi | I certify that the foregoing is a complete statement of any agreement or is bankruptcy proceeding. | arrangement for payment to me | e for representation of the debtor(s) in |
| | | oberto Figueroa-Carrasqu | |
| | Signa | erto Figueroa-Carrasquillo ature of Attorney gueroa Carrasquillo Law O | |

PO Box 186

Name of law firm

Caguas, PR 00726-0186 (787) 744-7699 Fax: (787) 746-5294 rfc@rfigueroalaw.com